## DEPARTMENT OF ENVIRONMENTAL QUALITY



## Emergency & Radiological Services Division P.O. BOX 4312

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RPD 38(1/06)

N	ORM QUE	STIONNAIRE - PLUGGED &	ABANDONED WELLS	
Licensee Name and Address			License Number	
Well Serial Number		Well Name	Parish	
Field Id		Field Name	Date Plugged	
$\Box Y \Box N$ Did the well have	a common t	ank battery with remaining prod	ucing wells in the field?	
Former well located on: Choose a) or b)		a) □Dry Land □Y □N Was the ground surrounding the former well surveyed for NORM?  If yes, were the readings (□less □greater) than twice background?  Attach survey if available.		
	b) \( \text{Water Body} \)			
Surface equipment: Choose a) or b)	a) □Remains at the well site or on the platform  □Y □N Was the equipment surveyed for NORM?  If yes, were the readings (□less □greater) than 50 μR/hr?  Attach survey if available.			
	W	b) □Removed from well site or platform  Where was the equipment transferred?  □Y □N Was the equipment surveyed for NORM?  If yes, Were the readings (□less □greater) than 50 μR/hr?  Attach survey if available.		
NORM Surveyor (attach q	alification	s)		
Printed Name and Title		Signature	Date	
Telephone Number	Email Address			